

MEANS TEST SHARING (MTS)

PATIENT INFORMATION MANAGEMENT SYSTEM (PIMS) VERSION 5.3 MODULE

DG*5.3*182 IVM*2.0*17

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Department of Veterans Affairs **V**/ST**A** Technical Services

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Introduction

Background

Means Test Sharing (MTS) is the first phase in implementing a full Centralized Means Testing (CMT) process within VA. This is new functionality designed to make completion of the Means Test and Copay Exemption Tests easier on the veteran, and more timely for the VA Medical Centers (VAMCs) that need a completed Means Test for billing and workload purposes.

The MTS phase involves the Health Eligibility Center (HEC)'s uploading Means Tests and Copay Exemption Tests into the databases at local VAMCs wherever the veteran has been seen. One or the other of these tests will be flagged as the Primary Test for the year. This will be transparent to the software's users, as uploads will be batched nightly and broadcast to the VAMCs as an HL7 background job by the HEC whenever a test is completed at another VAMC. Notification of the uploads will be sent to a mail group.

In addition to the nightly uploads, VAMCs may query the HEC database for individual Means Tests to see if one is already on file OR if one was done for a future date in anticipation of its being due. If a test is on file with the HEC, the VAMCs can request the download into their local files, even if the Means Test has a future date assigned to it.

About This Module

This module was produced in lieu of replacement pages to the PIMS V. 5.3 User and Technical Manuals, and is intended for use as a supplement to these manuals.

Related Patch

Patch IVM*2.0*17 is included in the release of Patch DG*5.3*182 and contains information about the enhancements and modifications to the Income Verification Match (IVM) Version 2.0 software. Refer to the Means Test Sharing Income Verification Match (IVM) Version 2.0 Module for documentation relating to the IVM changes.

Related Manuals

Means Test Sharing Income Verification Match (IVM) Version 2.0 Module

Installation Guide / Release Notes

No formal Installation Guide or Release Notes are being released with Patch DG*5.3*182. Detailed installation instructions and detailed information about enhancements to the PIMS V. 5.3 software are provided in the patch description. The complete patch description is available in the National Patch Module (NPM) on FORUM. For your convenience, a copy of the Software Installation Instructions and Functional Overview sections of the DG*5.3*182 patch description are in Appendices B and C, respectively, of this module.

Refer to the Means Test Sharing Income Verification Match (IVM) Version 2.0 Module for the enhancements and modifications in Patch IVM*2.0*17 that affect the IVM V. 2.0 software.

User Manual Updates

Deleted Option: Change a Patient's Mean Test Category

Patch DG*5.3*182 deletes the Change a Patient's Means Test Category option from the Means Test Supervisor Menu in the PIMS V. 5.3 ADT Module.

Modified Option: Delete a Copay Exemption Test

The Delete a Copay Exemption Test option has been modified to prevent VAMC personnel from editing or deleting a Copay Exemption Test that was created at another VAMC and distributed by the HEC.

New Option: Hardships

Patch DG*5.3*182 adds a new option, *Hardships*, to the Means Test Supervisor Menu in the PIMS V. 5.3 ADT Module. This option replaces the former *Change a Patient's Means Test Category* option.

Hardship Determinations continue to be the responsibility of the VAMCs; however, they will be sent to the HEC and distributed nationally along with the Primary Means Test to all VAMCs that the veteran has visited. Once granted, a Hardship is in effect until a new Means Test is required. The VAMC that granted the hardship will retain the original Means Test Status when the status changes. For example, if a Hardship determination changes the original status from Category C to Category A, the new status (A) is stored as the Means Test status. The original status (Category C) is then stored as Test Determined Status.

The Hardship Determinations screen provides the following List Manager actions:

GH	Grant Hardship	Allows you to grant hardships for current Means Tests for the selected patient.
		Prompts for Hardship Effective Date and Hardship Review Date. Once granted, a
		hardship remains in effect until a new Means Test is required.
EH	Edit Hardship	Allows you to edit hardships for current Means Tests for the selected patient.
		Prompts for Hardship Effective Date and Hardship Review Date. Only the VAMC
		that determines the hardship can edit or delete it.
DH	Delete Hardship	Allows you to delete hardships for current Means Tests for the selected patient.
		Only the VAMC that determines the hardship can edit or delete it. When a
		hardship is deleted, no record of it is retained in the database.
EC	Edit Comments	Allows you to add, edit, and delete comments related to hardships for current
		Means Tests for the selected patient.

Sample Hardship Determinations Screen

Hardship Determinations Sep 22, 1999 14:31:47 Page: 1 of

Patient: STELLA, KENT (2243) NSC VETERAN

Hardship

Current Means Test Status: CATEGORY A

Income Year: 1998

Means Test Date: SEP 07, 1999

Hardship?: YES

Hardship Effective Date: SEP 20, 1999

Review Date: JAN 18, 2000

Site Granting Hardship: 500

Approved By: MILNER, KAREN

Date Category Last Changed: SEP 20, 1999@09:51:05

Category Last Changed By: MILNER, KAREN

Enter ?? for more actions

GH (Grant Hardship) EH Edit Hardship

DH Delete Hardship EC Edit Comments

Select Action: Quit//

Automatic Financial Queries

A query is automatically sent to the Health Eligibility Center (HEC) when a user completes patient registration, load/edit of patient data, and/or scheduling of a veteran appointment with the following options.

Registration Menu	Scheduling Menu
Register a Patient	Make Appointment
Load/Edit Patient Data	

This query will determine if a Means Test or Copay Exemption Test (with Income Screening information) has been completed for the veteran for a specified income year. The HEC will process the query, and if there is a completed Means Test or Copay Exemption Test (with Income Screening information), the HEC will transmit the Primary test and any Hardship determinations to the VAMC that sent the query. The returned information that displays during the registration and load/edit processes will be similar to the following:

```
Patient is Category C based on primary means test
Has agreed to pay the deductible
Primary Means Test Last Applied 'SEP 7,1999' (COMPLETED: SEP 13,1999@10:41)
Medication Copayment Exemption Status: NON-EXEMPT
Patient's income is greater than Copay Income Threshold
Test date: SEP 07, 1999
```

Manual Financial Queries

A new option, IVM Financial Query, is added to the IVM Main Menu. Use it to manually generate a financial query to the HEC for a Means Test or Copay Exemption Test (with Income Screening information). For more information about this option, refer to the Means Test Sharing Income Verification Match (IVM) Version 2.0 Module.

Future Means Tests

VAMCs can query the HEC database for individual Means Tests to see if one is already on file OR if one was done for a future date in anticipation of its being due. If a test is on file with the HEC, the VAMCs can request the download into their local files, even if the Means Test has a future date assigned to it. The purpose of this functionality is to prevent unnecessary tests.

Technical Manual Updates

New Mail Group

DGMT MT/CT UPLOAD ALERTS

Used to notify the local VAMC of detailed changes about the patient's Means and Co-Pay test status changes, including Hardships. This mail group is populated via the post-init with members of DGEN Eligibility Alert.

New Options

This patch adds the DGMTH Hardships option to the DG Means Test User menu.

Deleted Options

This patch deletes the DG MEANS TEST CHANGE option from the DG Means Test User menu.

Modified Options

The DG CO-PAY TEST DELETE option has been modified to prevent VAMC personnel from editing or deleting RX Co-pay tests created at another VAMC and distributed by the HEC.

Data Dictionary Enhancements / Modifications

Modified Files

The following files and fields have been added or modified:

File Number	File Name	Description of Enhancements / Modifications
2	PATIENT	Modified the following fields:
		• SEX (#.02)
		DATE OF BIRTH (#.03)
		SOCIAL SECURITY NUMBER (#.09)
		SERVICE CONNECTED PERCENTAGE (#.302)
408.31	ANNUAL MEANS TEST	Modified the following fields:
		HARDSHIP EFFECTIVE DATE (#2.01)
		DT/TM TEST LAST EDITED (#2.02)
		• TEST DETERMINED STATUS (#2.03)
		• SITE GRANTING HARDSHIP (#2.04)
		SITE CONDUCTING TEST (#2.05)
		• STATUS (#.03)
		• LINKED RX COPAY/MEANS TEST (#2.06)
408.34	SOURCE OF INCOME TEST	Added the following values:
		• DCD
		OTHER FACILITY

New Protocols:

IVM Financial Query For Admission	New protocol on the DGPM Movement Events option.
	A financial query is to be initiated for admitted patients
	that require updated income information.
DGMTH Hardship Menu	Menu for new hardship list template.
DGMTH Add Hardship	Allows the user to add a new hardship.
DGMTH Delete Hardship	Allows the user to delete an existing hardship.
DGMTH Edit Hardship	Allows the user to edit an existing hardship.
DGMTH Date Stamp	Updates date stamp to means test from event driver.
DGMTH Edit Comments	Allows the user to edit comments from the new hardship
	option.

Templates

Input Template DGMT Enter/Edit Completion Added the new field Site Conducted Test List Template DGMTH Hardships For new Hardship option/screen

Routines

The following information is taken from the Routine Summary section of the DG*5.3*182 patch description. Refer to the Routines section of the PIMS V. 5.3 Technical Manual for instructions that tell you how to obtain a complete list of PIMS routines.

The following is a list of the routine(s) included in this patch. The second line of each of these routine(s) will look like:

<tab>;;5.3;Registration;**[patch list]**;Aug 13, 1993

Note: The Before Patch checksums are different for the DCD and the Non-DCD sites as shown in the following tables.

Non-DCD Site Checksum Values

Routine Name	Before Patch	After Patch	Patch List
DG10	6292789	6345252	32, 109, 139, 149, 182
DG182PRE	N/A	593319	182
DG53182E	1062368	1062368	182
DG53182P	N/A	13127017	182
DGENDBS	905456	1252117	122, 147, 182
DGMTA	11322882	11468124	33, 45, 137, 166, 177, 182
DGMTAUD	3959128	3673560	33, 45, 182
DGMTAUD1	1081077	1102399	33, 166, 182
DGMTAUD2	8377715	8165968	45, 166, 182
DGMTCOR	7221110	8732687	21, 45, 182
DGMTCOU	1855470	2889400	45, 182
DGMTDD	4910257	5018551	33, 182
DGMTDEL	9739841	10910843	33, 45, 182
DGMTDEL1	3770311	3805549	45, 166, 182
DGMTE	7559004	7425347	33, 45, 182
DGMTEO	4652179	4567628	33, 45, 182
DGMTH	N/A	5313060	182
DGMTHL	N/A	1073458	182
DGMTHL1	N/A	11896104	182
DGMT01	7224400	6751907	33, 182
DGMTOFA	8279993	8736910	3, 50, 182
DGMTOFA1	6882570	7231807	19, 33, 166, 182
DGMTOREQ	8309295	8233525	33, 100, 166, 182
DGMTP4	12731270	12943188	33, 182
DGMTR	7452565	11253409	45, 93, 114, 137, 141, 147, 177, 182
DGMTR1	N/A	7275933	182
DGMTREM	2958154	2639046	45, 182
DGMTSC	3182358	3203781	182
DGMTU	7461738	7706758	4, 33, 182
DGMTU11	4858846	5113659	33, 45, 182
DGMTU21	997397	1173918	33, 45, 182
DGMTU23	8549511	9157510	33, 182
DGMTU3	2131358	2419974	33, 45, 137, 182
DGMTU4	N/A	10521779	182
DGMTUTL	4352177	4449979	3, 31, 166, 182
DGREG	17349424	17441157	1, 32, 108, 147, 149, 182
VAFHLZIC	7546064	7008390	122, 182
VAFHLZMT	7340523	10552750	14, 33, 122, 182

DCD Site Checksum Values

Routine Name	Before Patch	After Patch	Patch List
DG10	6318635	6345252	32, 109, 139, 149, 182
DG182PRE	N/A	593319	182
DG53182E	N/A	1062368	182
DG53182P	N/A	13127017	182
DGENDBS	905456	1252117	122, 147, 182
DGMTA	12886846	11468124	33, 45, 137, 166, 177, 182
DGMTAUD	3673560	3673560	33, 45, 182
DGMTAUD1	1188787	1102399	33, 166, 182
DGMTAUD2	8165968	8165968	45, 166, 182
DGMTCOR	7221110	8732687	21, 45, 182
DGMTCOU	2579263	2889400	45, 182
DGMTDD	4817077	5018551	33, 182
DGMTDEL	10910843	10910843	33, 45, 182
DGMTDEL1	3665655	3805549	45, 166, 182
DGMTE	8771695	7425347	33, 45, 182
DGMTEO	4558642	4567628	33, 45, 182
DGMTH	N/A	5313060	182
DGMTHL	N/A	1073458	182
DGMTHL1	N/A	11896104	182
DGMT01	6751907	6751907	33, 182
DGMTOFA	8393353	8736910	3, 50, 182
DGMTOFA1	6882570	7231807	19, 33, 166, 182
DGMTOREQ	8233525	8233525	33, 100, 166, 182
DGMTP4	12943188	12943188	33, 182
DGMTR	7452565	11253409	45, 93, 114, 137, 141, 147, 177, 182
DGMTR1	N/A	7275933	182
DGMTREM	2639046	2639046	45, 182
DGMTSC	3182358	3203781	182
DGMTU	8419299	7706758	4, 33, 182
DGMTU11	5113659	5113659	33, 45, 182
DGMTU21	1173918	1173918	33, 45, 182
DGMTU23	9157510	9157510	33, 182
DGMTU3	2419974	2419974	33, 45, 137, 182
DGMTU4	N/A	10521779	182
DGMTUTL	4352177	4449979	3, 31, 166, 182
DGREG	17355282	17441157	1, 32, 108, 147, 149, 182
VAFHLZIC	7546064	7008390	122, 182
VAFHLZMT	7340523	10552750	14, 33, 122, 182

Appendix A – VAMC Business Rules for Processing Means Tests Received from HEC

The following table is an excerpt from the Means Test Sharing Software Requirement Specification (SRS).

1	If the veteran doesn't have Primary Eligibility the test can be accepted but an eligibility/enrollment query should be
	sent to HEC.

- A new field is needed in the Annual Means Test file. The new field will be named TEST-DETERMINED STATUS. The purpose will be to store the means test status as determined by the means test, as opposed to the patient's current status. For a means test (not a co-pay test) the STATUS field (#.03) is actually linked to the CURRENT MEANS TEST STATUS field in the Patient file via triggers. These rules will apply to the status fields:
 - 1. When a test is completed the determined status will go in both the MEANS TEST STATUS and the TEST-DETERMINED STATUS fields.
 - 2. When the MEANS TEST STATUS changes to NO LONGER REQUIRED or NO LONGER APPLICABLE the TEST-DETERMINED STATUS field will not be affected. Data fields will NOT be deleted from the record as is currently done. The TEST-DETERMINED STATUS may change from Pending Adjudication to A or C as the result of the net-worth adjudication. Editing the means test may change the TEST-DETERMINED STATUS.
 - 3. If a veteran has no Copay Exemption Test, but he does have a Means Test, if the veteran's MEANS TEST STATUS changes to NO LONGER REQUIRED a Copay Exemption Test will be automatically created based on the Means Test. It will be automatically completed using the same dates and other data as found in the Means Test.
 - 4. If a veteran who has a MEANS TEST STATUS of NO LONGER REQUIRED or NO LONGER APPLICABLE and an event occurs that now requires a test, if the field TEST-DETERMINED STATUS has a value it will be used to set the MEANS TEST STATUS appropriately. The exception is that, if the hardship was granted, the MEANS TEST STATUS will be based on the hardship rather than the TEST-DETERMINED STATUS.
 - 5. If a means test becomes in effect as described above, if there is a pharmacy co-pay test also in effect its MEANS TEST STATUS will be changed to NO LONGER APPLICABLE.

NOTE: This modification to the existing means test software was meant to solve various synchronization problems that occur in the sharing of means tests between sites and HEC. The problems involve these factors:

- Queries to HEC are not guaranteed to receive an immediate reply because the current message uses Mailman to transport messages.
- Several update processes occur in batch processing at night, and eligibility information can get out of synch for up to a couple of days.
- The means test information is transmitted to a VAMC on a different message than the eligibility information. When the means test is received it is possible that HEC is in the process of also sending updated eligibility information to the VAMC, but the messages are not received at the same time.
- By the same token, when the VAMC queries HEC for updated means test information, it is possible that the veteran has just reported changes to the eligibility information, but the changed eligibility information will not be transmitted to the HEC until that night.
- Interviews with HEC contact reps indicated that there have been cases where the veteran is means tested by HEC when not required, or changes to eligibility information from sites is not used to update the veteran's eligibility information. An example is that changes to Medicaid information transmitted to HEC from a VAMC may not be acted upon. Also, means tests are being done on patients living in a dorm unit or receiving military pensions based on disability. In all these cases, a pharmacy co-pay test may be appropriate rather than a means test

The strategy behind these proposed modifications is to overcome these synchronization problems with minimal changes to the current software, to maximize the sharing of information and to minimize the number of cases where the veteran is subjected to multiple tests.

3	A test received from HEC is uploaded and marked as Primary, and any existing test of the same income year is unflagged as being the primary test. The exception is for tests with a future effective date – in that case: A. Upload the test but do not flag it as the primary test. B. Notify the VAMC that the test is being held for the future effective date. C. When the effective date is reached, flag it as the primary test. D. If HEC later sends another test with the same income year, the newer test will be held for the future date instead. Note: Enrollment will use the Means Test data in determining enrollment priorities. At this time it is not known what impact the Primary Means Test will have on the enrollment process and that it is being addressed outside of the Means Test Sharing scope.
4	A test received from HEC that matches a test contained in the VAMC database currently flagged as primary can be ignored, i.e., there is no reason to store duplicates. Two fields will be used to determine whether the test is a duplicate, the source of test and the new Test Dt/Tm Last Edited field.
5	A test received from HEC can overlay a test that has the status of REQUIRED.
6	 When a means test is received for a patient that does not currently require a means test: A. Accept the means test. Set the TEST-DETERMINED STATUS field to be what HEC sent. B. Set the MEANS TEST STATUS to be NO LONGER REQUIRED or NO LONGER APPLICABLE C. If a means test is received but not required, the veteran requires a pharmacy co-payment exemption test but none is on file, automatically create a pharmacy co-payment test based on the means test received. D. If the patient is not currently logged for transmission to HEC, then send an eligibility/enrollment query to HEC. (Do not want to send an eligibility query to HEC if logged for transmission – the reply could wipe out changes
	that the VAMC just entered to the database.)
7	If HEC transmits a means test with a status of category C but also showing that a hardship was granted the MEANS TEST STATUS should be A but the MT DETERMINED STATUS should be C. The Means Test Status field is based both on the TEST-DETERMINED STATUS and the hardship. If HEC transmits a means test with the status of A showing that a hardship was granted it should be assumed that the original means test status was C, and that is what should be stored in the field TEST-DETERMINED STATUS.
8	If HEC sends a pharmacy co-pay exemption test for a patient that requires a means test, file the pharmacy co-pay exemption test. There is the possibility that the VAMC's eligibility information for the veteran is wrong, so HEC should be queried.
9	If HEC sends notification to delete a means test, along with the income year, the primary means test for that income year will be deleted. (The HEC notification may be to delete a test with a future effective date which is not yet flagged as the primary test, in which case it will be deleted.) If deleting the patient's current primary test, the veteran's means test status will become either REQUIRED or NO LONGER REQUIRED, depending on the eligibility data in the local database.
10	If HEC sends notification to delete a pharmacy co-pay test, along with the income year, then the pharmacy co-payment test flagged as the primary test for that income year will be deleted. If the income year corresponds to a test being held with a future effective date, i.e., not yet flagged as the primary test, it also will be deleted, which will not affect the patient's current pharmacy co-pay status.
11	If HEC sends notification to delete the hardship determination, along with the income year of the determination, then the hardship determination will be deleted from the veteran's primary means test for the specified income year. The veteran's current means test status should change appropriately if the income year matches that of the hardship being deleted.

Consistency Checks – failure to pass these results in the message not being uploaded and an exception condition going back to HEC

- 12 A. Should not have amount contributed to spouse if living w/patient
 - B. Need amount contributed to spouse if not living w/patient
 - C. Following fields must not be answered for veteran:
 - INCAPABLE OF SELF SUPPORT
 - CONTRIBUTED TO SUPPORT
 - CHILD HAD INCOME
 - INCOME AVAILABLE TO YOU
 - D. No income data allowed if spouse didn't live w/vet and amount contributed <\$600
 - E. Dependents must have Lived With Patient field must be answered
 - F. Shouldn't have Income Available answered if Child had no income
 - G. Shouldn't have contributed to Support if living w/patient
 - H. Shouldn't have income data if Child had income is NO
 - I. Dependents can't have medical or funeral expenses
 - J. No educational expenses allow for spouse
 - K. Dependent Educational Expense error income not available to vet
 - L. Income does not exceed child exclusion amount -educational expense not allowed
 - M. No net worth figures allowed for dependent children
 - N. Debts can't be greater than Other Property or Assets
 - O. Invalid sex transmitted for dependent
 - P. Unacceptable DOB for dependent
 - Q. Invalid dependent SSN transmitted
 - R. Invalid relationship for Means Test dependent
 - S. Dependent relationship/sex are inconsistent
 - T. Invalid Dependent Date must be before Means Test year
 - U. Two dependents transmitted with same SSN
 - V. Tests with the status of NO LONGER APPLICABLE, REQUIRED, or NO LONGER REQUIRED will be rejected these status codes are triggered by the eligibility information.
 - W. Deductible Expenses cannot exceed income for Means Test or Co-pay Test
 - X. Site conducting Test must be identified for Means Test or Co-pay Test
 - Y. Invalid Threshold A value for Means Test. (This should not result in an exception back to HEC. Rather, the test should be uploaded and the local VAMC notified of the problem.)
 - Z. Declines to give income information must be Cat C Means Test
 - AA. Cat A Means Test and net worth missing
 - BB. If a hardship determination was granted the fields the effective date and site granting hardship are required.
 - CC. The following consistency checks will be done if a MT Hardship is received from HEC:
 - The Hardship Indicator is required
 - The Site Granting Hardship is required
 - Starting in the year 2000, all hardships will require a Hardship Effective Date
 - The Hardship Effective Date must be a valid date
 - The Hardship Effective Date can not be earlier than Means Test Date (MT Effective Date)

Appendix B – Installation Instructions

The following is a copy of Section VI of the DG*5.3*182 patch description. To display the complete patch description, use the patch display option in the National Patch Module on FORUM.

SOFTWARE INSTALLATION INSTRUCTIONS:

Note:

- This patch should be installed during non-peak hours.
- Verify that Fileman 22 is installed.
- Even though you will be prompted to enter a Coordinator for the new DGMT MT/CT
 Upload Alerts mail group, contents of this mail group will be uploaded from the
 existing DGEN Eligibility Alert mail group.

WARNING

When an option is included in the patch build, the question REBUILD MENUS is asked as a PRE-INSTALL question. If you choose to have KIDs rebuild the menus it will happen at the end of the build installation and may take several hours.

Note: Most sites have a nightly batch job that rebuilds the menus so if you queued the installations ensure that it will complete prior to the batch job.

Or, if you are installing several builds, wait until the last one to use the KIDs rebuild functionality.

- Use the LOAD A DISTRIBUTION option on the KIDS INSTALLATION Menu, and enter: DG_53_P182.KID.
- Review your mapped set. If any of the routines listed in the ROUTINE SUMMARY section are mapped, they should be removed from the mapped set at this time.
- 3. From the Kernel Installation and Distribution System Menu, select the Installation menu.
- 4. From this menu, you may elect to use the following options (when prompted for INSTALL NAME, enter DG*5.3*182):

Since this a multi-build install, options (b.) (c.) and (d.) must be run for each individual patch/build included in this transport. Only (a.) Backup a Transport Global and Installation (Step 5) can and must be referenced exclusively by the primary patch.

Patches included: DG*5.3*182 IVM*2.0*17

- a. Backup a Transport Global this option will create a backup message of any routines exported with the patch. It will NOT backup any other changes such as DDs or templates.
- b. Compare Transport Global to Current System this option will allow you to view all changes that will be made when the patch is installed. It compares all components of the patch (routines, DDs, templates, etc.).
- c. Verify Checksums in Transport Global this option will allow you to ensure the integrity of the routines that are in the transport global.
- d. Print Transport Global this option will allow you to view the components of the KIDS build.
- 5. Use the Install Package(s) option and select the patch DG*5.3*182.
- 6. When prompted 'Want to DISABLE Scheduled Options, Menu Options, and Protocols? YES//', respond YES. When prompted to select the options you would like to place out of order, enter the following:

DG LOAD PATIENT DATA

DG REGISTER PATIENT

SDAM APPT MGT

DGBT BENE TRAVEL MENU

DG MEANS TEST USER MENU

DG CO-PAY TEST USER MENU

Load/Edit Patient Data

Register a Patient

Appointment Management

Beneficiary Travel Menu

Means Test User Menu

Copay Exemption Test User Menu

and the following protocol be place out of order:

DGPM MOVEMENT EVENTS MOVEMENT EVENTS v 5.0

- 7. If routines were unmapped as part of Step 2, they should be returned to the mapped set once the installation has run to completion.
- 8. Delete the post-install routines after successful patch installation.

Appendix C – Patch DG*5.3*182 Functional Overview

The following is a copy of Section II of the DG*5.3*182 patch description. To display the complete patch description, use the patch display option in the National Patch Module on FORUM.

FUNCTIONAL OVERVIEW:

This Means Test Patch includes the following changes or additions to existing functionality:

1. All VAMCs will automatically generate an HL7 query to the Health Eligibility Center (HEC) when a user completes Patient Registration (with the option Register a Patient [DG REGISTER PATIENT]), Load/Edit of Patient data (with the option Load/Edit Patient Data [DG LOAD PATIENT DATA]) and/or Scheduling of a veteran appointment (with the Make Appointment option [SDM Make Appointment]). This query will determine if a Means Test or Pharmacy Co-payment Exemption test (with Income Screening information) had been completed for the veteran for a specified income year. HEC will process the query and if there is a completed Means Test or Pharmacy Co-payment Exemption Test (with Income Screening information) HEC will distribute an HL7 message (ORF~Z10) back to a querying VAMC. The message will return the Primary test and any Hardship determinations.

If the test from the prior year is still effective and the query requests a test from an income year that does not exist, then the effective test from the prior income year will be returned as the Primary test via an HL7 message to the VAMC. If a query is received for a patient who, according to HEC's eligibility information, does not require a test, HEC will respond with any test information that is available.

All VAMCs will have the ability to manually generate a query to HEC for a Means Test or Pharmacy Co-Payment Exemption Test(with Income Screening information) when a user requests a query through IVM Financial Query (by using the option IVM Financial Query [IVM FINANCIAL QUERY]).

- 2. When HEC receives a completed Means Test or Pharmacy Co-Payment Exemption Test (Income Screening) from the VAMCs, it will process it and decide whether it is the Primary test. If HEC deems the test as Primary, then it will be automatically distributed as the Primary test via HL7 on an unsolicited basis to all sites that the veteran has visited. All tests completed at a VAMC will be transmitted to HEC via an HL7 message.
- 3. Hardship Determinations will continue to be the responsibility of the VAMCs; however, they will be sent to HEC and distributed nationally to all VAMCs that the veteran has visited. Once granted, a Hardship is in effect until a new Means test is required. Hardships will be distributed from HEC along with the Primary Means Test. The VAMC that determines the Hardship can edit or delete it, but no other site can do so. After deleting the Hardship determination, no record of it will be retained in the database. A Hardship determination that has been edited or deleted will be distributed to all VAMCs that the veteran has visited.

- 4. The VAMC will retain the original Means Test Status when the status changes. For example--if a Hardship determination changes the original status to Category A, then the new status (A) is stored as the Means Test status. The original status is then stored as Test Determined Status.
- 5. VAMCs will now receive (from HEC) Means Tests and Pharmacy Co-Payment Exemption tests with future effective dates in order to reduce the number of unnecessary tests that are performed.
- 6. If a VAMC edits a test that they conducted, and a status change is the result of that edit, the test will be transmitted to HEC via an HL7 message. It will be distributed nationally if HEC determines that it is a new Primary test.
- 7. VAMC tests that are stored at HEC can only be edited or deleted by the VAMC that conducted the test.
- 8. The error messages returned from the HL7 message processing has been improved.
- 9. The Delete a Copay Exemption Test [DG CO-PAY TEST DELETE] option has been modified to prevent VAMC personnel from editing or deleting RX Co-pay tests created at another VAMC and distributed by HEC.
- 10. The IVM Case Inquiry [IVM OUTPUT CASE INQ] option had been modified to include Copay Tests.
- 11. Two values have been added to the SOURCE OF INCOME TEST file (#408.34) DCD and Other Facility.